

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	KSD		11/19/00
FORMALITY REVIEW		1-9055	1-301
RESPONSE FORMALITY REVIEW		Hildes	2-16-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/18/01
2	✓	✓	5/18/01
3	✓	✓	5/18/01
4	✓	✓	5/18/01
5	✓	✓	5/18/01
6	✓	✓	5/18/01
7	✓	✓	5/18/01
8	✓	✓	5/18/01
9	✓	✓	5/18/01
10	✓	✓	5/18/01
11	✓	✓	5/18/01
12	✓	✓	5/18/01
13	✓	✓	5/18/01
14	✓	✓	5/18/01
15	✓	✓	5/18/01
16	✓	✓	5/18/01
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23	✓	✓	5/18/01
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41	✓	✓	5/18/01
42	✓	✓	5/18/01
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44	✓	✓	5/18/01
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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